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FEC FORM 1	STATEMENT OF ORGANIZATION						Office	Jse Only		
1. NAME OF COMMITTEE (ir	n full)	(Check if nar is changed)		ample:If typing, er the lines.	type	12FE4M	:5			
Renewing	the An	nerican Dre	am PA	C						. 1
ADDRESS (number and street)		110 E. Liberty Street								
(Check if address is changed)		Mankato				MN	56001			
			CITY			STATE		ZIP COI	DE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only campaignaccounting		ddress)						
COMMITTEE'S WEB	PAGE ADD	RESS (URL)								
(Check if is change										
2. DATE 05	M / D T	2012								
3. FEC IDENTIFIC	CATION NU	MBER (C004756	08						
4. IS THIS STATE	MENT	NEW (N)	or >	AMENDE	ED (A)					
I certify that I have e	examined this	s Statement and to th	e best of my	knowledge and	d belief it i	is true, corre	ct and co	mplete.		
Type or Print Name	of Treasurer	Shelli Hesselroth								
Signature of Treasure	Shelli He	esselroth		[Electronically	Filed]	Date 0	M / D	17 /	2012	2
NOTE: Submission of		ous, or incomplete infor						alties of 2	U.S.C. §	437g.
Office			Т	For further info	rmation co	ntact:				

Office			For further information contact:	FEC FORM 1
Use			Federal Election Commission Toll Free 800-424-9530	(Revised 02/2009)
 Only			Local 202-694-1100	(Neviseu 02/2009)